

|   |  |                          |                        |            |
|---|--|--------------------------|------------------------|------------|
| <b>FEE TRANSMITTAL</b><br>For FY 2005<br><br><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 |  | <b>Complete if Known</b> |                        |            |
|   |  | Application Number       | 10/661,678-Conf. #9153 |            |
|   |  | Filing Date              | September 15, 2003     |            |
|   |  | First Named Inventor     | Takashi TSUJI          |            |
|   |  | Examiner Name            | L. S. Lao              |            |
| TOTAL AMOUNT OF PAYMENT (\$)  |  | 120.00                   | Attorney Docket No.    | 1247-0523P |

**METHOD OF PAYMENT** (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_  
☐ Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP  
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  
☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, **except for the filing fee**  
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
|                  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
| Utility          | 300         | 150                   | 500         | 250                   | 200              | 100                   |                |
| Design           | 200         | 100                   | 100         | 50                    | 130              | 65                    |                |
| Plant            | 200         | 100                   | 300         | 150                   | 160              | 80                    |                |
| Reissue          | 300         | 150                   | 500         | 250                   | 600              | 300                   |                |
| Provisional      | 200         | 100                   | 0           | 0                     | 0                | 0                     |                |

**2. EXCESS CLAIM FEES**

| Fee Description                                    | Fee (\$) | Small Entity Fee (\$) |
|--|----------|-----------------------|
| Each claim over 20 (including Reissues)            | 50       | 25                    |
| Each independent claim over 3 (including Reissues) | 200      | 100                   |
| Multiple dependent claims                          | 360      | 180                   |

Total Claims - = Extra Claims x Fee (\$) = Fee Paid (\$)

Multiple Dependent Claims  
Fee (\$) Fee Paid (\$)

Indep. Claims - = Extra Claims x Fee (\$) = Fee Paid (\$)

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

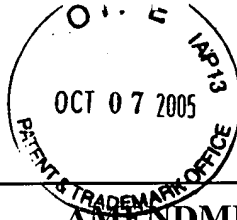
Total Sheets - 100 = Extra Sheets / 50 Number of each additional 50 or fraction thereof (round up to a whole number) x Fee (\$) = Fee Paid (\$)

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1251 Extension for response within first month 120.00

|                   |                    |                                   |                 |
|-------------------|--------------------|-----------------------------------|-----------------|
| SUBMITTED BY      |                    |                                   |                 |
| Signature         |                    | Registration No. (Attorney/Agent) | 29,271          |
| Name (Print/Type) | Charles Gorenstein | Telephone                         | (703) 205-8000  |
|                   |                    | Date                              | October 7, 2005 |



| <b>AMENDMENT TRANSMITTAL LETTER</b>  |                                  |                                   |                             | Docket No.<br>1247-0523P      |      |
|--|----------------------------------|-----------------------------------|-----------------------------|-------------------------------|------|
| Application No.<br>10/661,678-Conf. #9153  |                                  | Filing Date<br>September 15, 2003 |                             | Examiner<br>L. S. Lao         |      |
| Art Unit<br>2643   |                                  |                                   |                             |                               |      |
| Applicant(s): Takashi TSUJI  |                                  |                                   |                             |                               |      |
| Invention: DATA COMMUNICATION SYSTEM AND MEDIUM FOR STORING COMMUNICATION CONTROL PROGRAM  |                                  |                                   |                             |                               |      |
| <b>MS Amendment</b><br>Commissioner for Patents<br>P.O. Box 1450<br>Alexandria, VA 22313-1450  |                                  |                                   |                             |                               |      |
| Transmitted herewith is an amendment in the above-identified application.  |                                  |                                   |                             |                               |      |
| The fee has been calculated and is transmitted as shown below.   |                                  |                                   |                             |                               |      |
| <b>CLAIMS AS AMENDED</b>   |                                  |                                   |                             |                               |      |
|  | Claims Remaining After Amendment | Highest Number Previously Paid    | Number Extra Claims Present | Rate                          |      |
| Total Claims   | 18                               | - 20 =                            |                             | x                             |      |
| Independent Claims   | 3                                | - 3 =                             |                             | x                             |      |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/>   |                                  |                                   |                             |                               |      |
| Other fee (please specify):  |                                  |                                   |                             |                               |      |
| <b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>  |                                  |                                   |                             |                               | 0.00 |
| <input checked="" type="checkbox"/> Large Entity <span style="margin-left: 200px;"><input type="checkbox"/> Small Entity</span>  |                                  |                                   |                             |                               |      |
| <input checked="" type="checkbox"/> No additional fee is required for this amendment.  |                                  |                                   |                             |                               |      |
| <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____.<br>A duplicate copy of this sheet is enclosed.   |                                  |                                   |                             |                               |      |
| <input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.  |                                  |                                   |                             |                               |      |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.  |                                  |                                   |                             |                               |      |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-2448</u><br>as described below. A duplicate copy of this sheet is enclosed. |                                  |                                   |                             |                               |      |
| <input checked="" type="checkbox"/> Credit any overpayment.  |                                  |                                   |                             |                               |      |
| <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.   |                                  |                                   |                             |                               |      |
| <br>Charles Gorenstein<br>Attorney Reg. No.: 29,271  |                                  |                                   |                             | Dated: <u>October 7, 2005</u> |      |
| BIRCH, STEWART, KOLASCH & BIRCH, LLP<br>8110 Gatehouse Rd<br>Suite 100 East<br>P.O. Box 747<br>Falls Church, Virginia 22040-0747<br>(703) 205-8000   |                                  |                                   |                             |                               |      |